F.	n this information to	dentify your ca	ase:				1				
Deb			d Cooper, Jr.								
Debtor 2 Marie Lynne Cooper (Spouse, if filing)						_					
Unit	ed States Bankrupt	cy Court for the	: EASTERN DISTRICT	OF MISSOURI	_	_					
Case (If knd		10548	48				Check if this is:	J &I:			
								nt showin	g postpetition ollowing date:	chapter	
Official Form 106I							MM / DD/ YYYY				
Sc	hedule I: `	Your Inc	ome							12/15	
spou	ise. If you are separate shee	arated and you	are married and not filli r spouse is not filling w On the top of any additi	ith you, do not inclu	ude infor	mati	on about your spo	use. If m	ore space is r	needed,	
1.	Fill in your emplo	oyment		Debtor 1	Debtor 2	Debtor 2 or non-filing spouse					
	If you have more t		.	☐ Employed			☐ Emplo	☐ Employed			
	attach a separate page with information about additional		Employment status	Not employed			Not employed				
	employers.		Occupation								
	Include part-time, seasonal, or self-employed work.		Employer's name								
	Occupation may in or homemaker, if i		Employer's address								
			How long employed t	here?							
Part	2: Give Det	ails About Mor	nthly income								
	nate monthly inco se unless you are s		ate you file this form. If	you have nothing to	report for	any	line, write \$0 in the	space. Inc	clude your nor	ı-filing	
•	or your non-filing s space, attach a se	•	ore than one employer, co this form.	ombine the information	on for all e	emple	oyers for that perso	n on the li	nes below. If y	ou need	
							For Debtor 1		btor 2 or ng spouse		
2.			ry, and commissions (becalculate what the month)		2.	\$	0.00	\$	0.00		
3. Estimate and list monthly overtime pay.					3.	+\$	0.00	+\$	0.00		
4.	Calculate gross I	ncome. Add lir	ne 2 + line 3.		4.	\$	0.00	\$	0.00		
								-			

Official Form 106 Schedule I: Your Income page 1

5a. Tax, Medicare, and Social Security deductions 5a. \$ 0.00 \$ 0.00 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ 0.00 5e. Insurance 5e. \$ 0.00 \$ 0.00 5f. Domestic support obligations 5f. \$ 0.00 \$ 0.00 5g. Union dues 5g. \$ 0.00 \$ 0.00 5h. Other deductions. Specify: 5h.+ \$ 0.00 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 0.00	Debtor 1 Debtor 2		Marie Lynne Cooper		Case number (if known) For Debtor 1		19-10548		
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